

FIRST REGULAR SESSION

SENATE BILL NO. 346

94TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SHOEMYER.

Read 1st time January 22, 2007, and ordered printed.

TERRY L. SPIELER, Secretary.

1604L.011

AN ACT

To repeal section 334.735, RSMo, and to enact in lieu thereof two new sections relating to medical professionals.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 334.735, RSMo, is repealed and two new sections
2 enacted in lieu thereof, to be known as sections 334.735 and 334.751, to read as
3 follows:

334.735. 1. As used in sections 334.735 to 334.749, the following terms
2 mean:

3 (1) "Applicant", any individual who seeks to become licensed as a
4 physician assistant;

5 (2) "Certification" or "registration", a process by a certifying entity that
6 grants recognition to applicants meeting predetermined qualifications specified
7 by such certifying entity;

8 (3) "Certifying entity", the nongovernmental agency or association which
9 certifies or registers individuals who have completed academic and training
10 requirements;

11 (4) "Department", the department of economic development or a
12 designated agency thereof;

13 (5) "License", a document issued to an applicant by the department
14 acknowledging that the applicant is entitled to practice as a physician assistant;

15 (6) "Physician assistant", a person who has graduated from a physician
16 assistant program accredited by the American Medical Association's Committee
17 on Allied Health Education and Accreditation or by its successor agency, who has
18 passed the certifying examination administered by the National Commission on

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

19 Certification of Physician Assistants and has active certification by the National
20 Commission on Certification of Physician Assistants who provides health care
21 services delegated by a licensed physician. A person who has been employed as
22 a physician assistant for three years prior to August 28, 1989, who has passed the
23 National Commission on Certification of Physician Assistants examination, and
24 has active certification of the National Commission on Certification of Physician
25 Assistants;

26 (7) "Recognition", the formal process of becoming a certifying entity as
27 required by the provisions of sections 334.735 to 334.749;

28 (8) "Supervision", [control exercised over a physician assistant working
29 within the same office facility of the supervising physician except a physician
30 assistant may make follow-up patient examinations in hospitals, nursing homes
31 and correctional facilities, each such examination being reviewed, approved and
32 signed by the supervising physician] **overseeing the activities of, and**
33 **accepting responsibility for, the medical services rendered by a**
34 **physician assistant. The supervising physician shall at all times be**
35 **immediately available to the physician assistant for consultation,**
36 **assistance, or intervention either personally or via telecommunications.**
37 **A supervising physician shall be personally present for practice**
38 **supervision and collaboration a minimum of eighty percent of clinic**
39 **hours in any clinic location utilizing physician's assistants. The**
40 **physician assistant shall be limited to practice at the supervising**
41 **physician's primary location of practice and where the supervising**
42 **physician is able to be physically present at the location within thirty**
43 **minutes so that there is no impediment to effective intervention and**
44 **supervision of patient care. A supervising physician shall be engaged**
45 **in the full-time practice of medicine and hold an active license to**
46 **practice.** The board shall promulgate rules pursuant to chapter 536, RSMo, for
47 the [proximity of practice between the physician assistant and the supervising
48 physician and] documentation of joint review of the physician assistant activity
49 by the supervising physician and the physician assistant.

50 2. The scope of practice of a physician assistant shall consist only of the
51 following services and procedures:

52 (1) Taking patient histories;

53 (2) Performing physical examinations of a patient;

54 (3) Performing or assisting in the performance of routine office laboratory

55 and patient screening procedures;

56 (4) Performing routine therapeutic procedures;

57 (5) Recording diagnostic impressions and evaluating situations calling for
58 attention of a physician to institute treatment procedures;

59 (6) Instructing and counseling patients regarding mental and physical
60 health using procedures reviewed and approved by a licensed physician;

61 (7) Assisting the supervising physician in institutional settings, including
62 reviewing of treatment plans, ordering of tests and diagnostic laboratory and
63 radiological services, and ordering of therapies, using procedures reviewed and
64 approved by a licensed physician;

65 (8) Assisting in surgery;

66 (9) Performing such other tasks not prohibited by law under the
67 supervision of a licensed physician as the [physician's] **physician** assistant has
68 been trained and is proficient to perform;

69 (10) Physician assistants shall not perform abortions.

70 3. Physician assistants shall not prescribe nor dispense any drug,
71 medicine, device or therapy independent of consultation with the supervising
72 physician, nor prescribe lenses, prisms or contact lenses for the aid, relief or
73 correction of vision or the measurement of visual power or visual efficiency of the
74 human eye, nor administer or monitor general or regional block anesthesia during
75 diagnostic tests, surgery or obstetric procedures. Prescribing and dispensing of
76 drugs, medications, devices or therapies by a physician assistant shall be
77 pursuant to a physician assistant supervision agreement which is specific to the
78 clinical conditions treated by the supervising physician and the physician
79 assistant shall be subject to the following:

80 (1) A physician assistant shall not prescribe controlled substances;

81 (2) The types of drugs, medications, devices or therapies prescribed or
82 dispensed by a physician assistant shall be consistent with the scopes of practice
83 of the physician assistant and the supervising physician;

84 (3) All prescriptions shall conform with state and federal laws and
85 regulations and shall include the name, address and telephone number of the
86 physician assistant and the supervising physician;

87 (4) A physician assistant or advanced practice nurse as defined in section
88 335.016, RSMo, may request, receive and sign for noncontrolled professional
89 samples and may distribute professional samples to patients;

90 (5) A physician assistant shall not prescribe any drugs, medicines, devices

91 or therapies the supervising physician is not qualified or authorized to prescribe;
92 and

93 (6) A physician assistant may only dispense starter doses of medication
94 to cover a period of time for seventy-two hours or less.

95 4. A physician assistant shall clearly identify himself or herself as a
96 physician assistant and shall [not] **specifically inform each patient seen of**
97 **his or her status as a physician assistant and shall specifically inform**
98 **each patient that he or she has the opportunity to be seen by the**
99 **supervising physician. No physician assistant shall** use or permit to be
100 used in the physician assistant's behalf the terms "doctor", "Dr." or "doc" nor hold
101 himself or herself out in any way to be a physician or surgeon. No physician
102 assistant shall practice or attempt to practice without physician supervision or
103 in any location where the supervising physician is not immediately available for
104 consultation, assistance and intervention, except in an emergency situation, nor
105 shall any physician assistant bill a patient independently or directly for any
106 services or procedure by the physician assistant.

107 5. For purposes of this section, the licensing of physician assistants shall
108 take place within processes established by the state board of registration for the
109 healing arts through rule and regulation. The board of healing arts is authorized
110 to establish rules pursuant to chapter 536, RSMo, establishing licensing and
111 renewal procedures, supervision, supervision agreements, fees, and addressing
112 such other matters as are necessary to protect the public and discipline the
113 profession. An application for licensing may be denied or the license of a
114 physician assistant may be suspended or revoked by the board in the same
115 manner and for violation of the standards as set forth by section 334.100, or such
116 other standards of conduct set by the board by rule or regulation. Persons
117 licensed pursuant to the provisions of chapter 335, RSMo, shall not be required
118 to be licensed as physician assistants. **All applicants for physician assistant**
119 **licensure who complete their physician assistant training program**
120 **after January 1, 2007, shall have a master's degree in a health or**
121 **medical science related field.**

122 6. "Physician assistant supervision agreement" means a written
123 agreement, jointly agreed-upon protocols or standing order between a supervising
124 physician and a physician assistant, which provides for the delegation of health
125 care services from a supervising physician to a physician assistant and the review
126 of such services. **In any physician assistant supervision agreement, the**

127 **supervising physician and physician assistant shall designate the**
128 **primary location where the supervising physician practices at least**
129 **eighty percent of clinic hours. The board shall randomly review**
130 **physician assistant supervision agreements and the practices of**
131 **physician assistants and supervising physicians under such**
132 **agreements.**

133 7. When a physician assistant supervision agreement is utilized to provide
134 health care services for conditions other than acute self-limited or well-defined
135 problems, the supervising physician or other physician designated in the
136 supervision agreement shall see the patient for evaluation and approve or
137 formulate the plan of treatment for new or significantly changed conditions as
138 soon as practical, but in no case more than two weeks after the patient has been
139 seen by the physician assistant.

140 8. At all times the physician is responsible for the oversight of the
141 activities of, and accepts responsibility for, health care services rendered by the
142 physician assistant.

143 9. **No physician shall be designated to service as supervising**
144 **physician for more than three licensed physician assistants. Physicians**
145 **who have also been designated as a collaborative practice physician**
146 **under section 334.101, shall only supervise a total of three either**
147 **licensed physician assistants or collaborative practice registered**
148 **professional nurses, or a combination thereof. This limitation shall not**
149 **apply to physician assistant agreements of hospital employees**
150 **providing inpatient care services in hospitals as defined in chapter 197,**
151 **RSMo.**

152 10. It is the responsibility of the supervising physician to
153 determine and document the completion of at least a one-month period
154 of time during which the licensed physician assistant shall practice
155 with a supervising physician continuously present before practicing in
156 a setting where a supervising physician is not continuously present.

157 11. It shall be void and against public policy for any contract or
158 other agreement entered into with a physician to:

159 (1) Require the physician as a condition of employment to act as
160 a supervising physician for any physician assistant;

161 (2) Limit the supervising physician's ultimate authority over any
162 protocols or standing orders or in the delegation of the physician's
163 authority to any physician assistant; or

164 **(3) Require the physician to be employed by a licensed physician**
165 **assistant being supervised under this section or a registered**
166 **professional nurse in collaboration by such physician under section**
167 **334.104, or for a physician to be employed by an entity with whom the**
168 **physician assistant or registered professional nurse has a financial**
169 **relationship. A financial relationship exists if the physician assistant**
170 **or immediate family member has a direct or indirect ownership or**
171 **investment interest in the entity whether through equity, debt, or other**
172 **means, or receives remuneration from a compensation arrangement**
173 **from the entity.**

334.751. Any hospital which employs an advanced practice nurse
2 **or a physician assistant shall allow any nonboard certified M.D. or D.O.**
3 **physician to practice in the same hospital setting subject to the same**
4 **credentialing procedures required of the advanced practiced nurse or**
5 **physician assistant as long as those credentialing procedures do not**
6 **discriminate against a nonboard-certified physician.**

Bill ✓

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